TO BE COMPLETED BY ALL PUBLIC ENTITIES

NEW JERSEY ECONOMIC DEVELOPMENT AUTHORITY HAZARDOUS DISCHARGE SITE REMEDIATION FUND

Municipal Program
PRELIMINARY QUESTIONNAIRE
PLEASE NOTE THAT ONLY MUNICIPAL GOVERNMENTAL ENTITIES NEED TO FILL OUT THIS ATTACHMENT

In order to expedite the processing of municipal grant or loan application at the NJEDA, please complete this Preliminary Questionnaire and return it to Edward J. Stankiewicz of the NJDEP. He will forward it to the NJEDA when your application has received NJDEP approval. If you have any questions about the available financing, please call JoAnn Petrizzo, NJEDA at (609) 292-0350.

1.	Applicant:		
	Project Name:		
2.	Please indicate the estimated project start date. (Note that project approval.)	s may not start until after receiving NJDEP	
	Start Date:		
3.	Please list the current owner of the project site:		
4.	If you are not the owner, do you hold a tax sales certificate for the property?		
	() Yes () no		
	When was the tax sale certificate obtained?	e:	
	PLEASE PROVIDE A COPY OF PROPERTY OWNERSHIP, SUCH AS TAX SALE THIS APPLICATION.	CERTIFICATE, FORECLOSURE PAPERS, ETC. WITH	
5.	Describe any pending or threatened litigation related to the project site.		
6.	Please describe any other pending issues that could delay grant/loan cle	osing.	
(08/01)			

7.	underground storage tanks, please identify other funding sources:
	() Issuance of Bonds \$ () Capital Budget Expenditure \$
	() Other, please describe
LOAN	I APPLICANTS, PLEASE ANSWER QUESTIONS 8 THROUGH 11:
8.	Please indicate the length of term, up to ten years, you desire for this loan. (Note that this term must be coterminous with all additional project financing.)
	Years
9.	Please indicate if your municipality will need Local Finance Board Approval to participate in this program (i.e. are you within your legal debt limit?)
	() Yes, please state reason below() No
10.	If you currently hold a tax sale certificate or have acquired the site through foreclosure, do you intend to sell the remediated property and return it to your tax rolls within the next two years?
	() Yes () No
11.	If you answered yes to question 10, please indicate whether you would like a moratorium on principal and interest payments up to a maximum of two years.
	() Yes, I request a payment moratorium of years () No
12.	Please provide additional comments in the space below.
gover	cation: By their signature below, the undersigned, a duly authorized representative of the above unit of local nment, hereby certifies on behalf of the local government that the information contained herein is true, complete and ct in all respects as of the date hereof.
Signa	ture: Date:
Name	e (print):
Title:	